FORM D

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549





# FORM D NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D, SECTION 4(6), AND/OR JNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY								
Prefix Serial								
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	DATE RECEIVED							
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160			·
Name of Offering: 'Check'if this is an amendment and nam	e has changed, and	indicate change.)	
Convertible Promissory Notes			
Filing Under (Check box(es) that apply): Rule 504	Rule 505		Section 4(6)⊠ ULOE
Type of Filing: New Filing Amendmen	<u></u>		
A. BA	ASIC IDENTIFICA	ATION DATA	
<ol> <li>Enter the information requested about the issuer.</li> </ol>			
Name of Issuer: (check if this is an amendment and name I	nas changed, and in	dicate change.)	
MachineryLink, Inc.			
Address of Executive Offices (	Number and Street,	, City, State, Zip Coo	
1600 Genessee, Suite 700, Kansas City, Missouri 64102			816-472-5900
•	Number and Street.	, City, State, Zip Coo	de) Telephone Number (Including Area Code)
(if different from Executive Offices)	PROCES	CED	
			- 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884
Brief Description of Business	OCT 092	nas O	
		1	I DEBAH BAHI IDAN AAHI IDAN KANDI ILIBA MAH IDAN KADI
Leasing and maintenance of farm equipment	THOMSO	N	07079317
Type of Business Organization:	FINANCIA	10	10 ) P - 2 - 1 P -
☐ corporation ☐ limited partnership, alr	eady formed	other (please	specify): limited liability company
business trust limited partnership, to			
•	Month	Year	
Actual or Estimated Date of Incorporation or Organization:	03	2000	Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-lette	er U.S. Postage Serv	vice abbreviation for	State: DE
	; FN for other forei		

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA
<ul> <li>Enter the information requested for the following:         <ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul> </li> </ul>
Check Box(es) that Apply:
Full Name (Last name first, if individual) Scott D. Hazlett  Periode Project Of the State City State Zin Code)
Business or Residence Address (Number and Street, City, State, Zip Code) 1600 Genessee, Suite 360, Kansas City, Missouri 64102
Check Box(es) that Apply:
Full Name (Last name first, if individual) Lang, Jay
Business or Residence Address (Number and Street, City, State, Zip Code) 1600 Genessee, Suite 360, Kansas City, Missouri 64102
Check Box(es) that Apply:
Full Name (Last name first, if individual) Peterson, Jeff
Business or Residence Address (Number and Street, City, State, Zip Code) 1600 Genessee, Suite 360, Kansas City, Missouri 64102
Check Box(es) that Apply:
Full Name (Last name first, if individual)  LeMay, Ronald
Business or Residence Address (Number and Street, City, State, Zip Code) October Capital, LLC, 1901 W. 47 <sup>th</sup> Place, Suite 310, Westwood, Kansas 66205
Check Box(es) that Apply:
Full Name (Last name first, if individual) LeMay, Lance
Business or Residence Address (Number and Street, City, State, Zip Code) October Capital, LLC, 1901 W. 47 <sup>th</sup> Place, Suite 310, Westwood, Kansas 66205
Check Box(es) that Apply:
Full Name (Last name first, if individual) Ritchie, James
Business or Residence Address (Number and Street, City, State, Zip Code) Meridian IQ, 10990 Roe Avenue, Overland Park, Kansas 66211
Check Box(es) that Apply:
Full Name (Last name first, if individual) October Capital, LLC  Desired Address Observed Street City State Zin Code)
Business or Residence Address (Number and Street, City, State, Zip Code) 1901 W. 47th Place, Suite 310, Westwood, Kansas 66205
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Adams Street Partners V, L.P.  Residual Control of the Control of C
Business or Residence Address (Number and Street, City, State, Zip Code) One North Wacker Drive, Suite 2200, Chicago, Illinois 60606
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Alpha Capital III SBIC, L.P. Business or Residence Address (Number and Street, City, State, Zip Code)
122 S. Michigan Ave., Suite 1700, Chicago, Illinois 60603
Check Box(cs) that rippi).
Full Name (Last name first, if individual) Alpha Capital Fund III, L.P.  Business or Residence Address (Number and Street, City, State, Zip Code)
122 S. Michigan Ave., Suite 1700, Chicago, Illinois 60603
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

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1					
Full Name (Last name first, if Rose, John W.	individual)				
Business or Residence Addres 511 Anderwood Drive,			e)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if River Cities SBIC III, I	,				
Business or Residence Address	ss (Number and Str	reet, City, State, Zip Code	e)		
221 East Forth Street, S	Suite 1900, Cincing	nati, Ohio 45202			

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	B. INFORMATION ABOUT OFFERING	
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.	Yes No
2.	What is the minimum investment that will be accepted from any individual?	\$87,000
3.	Does the offering permit joint ownership of a single unit?	Yes No □
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.	
Full	Name (Last name first, if individual)	
Busi	ness or Residence Address (Number and Street, City, State, Zip Code)	
Nam	e of Associated Broker or Dealer	
State	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers	T 411.00
	(Check "All States" or check individual States)	All States
Full	Name (Last name first, if individual)	
Busi	ness or Residence Address (Number and Street, City, State, Zip Code)	
Nam	e of Associated Broker or Dealer	
State	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)	All States
	[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]	
Full	Name (Last name first, if individual)	
Busi	iness or Residence Address (Number and Street, City, State, Zip Code)	
Nan	ne of Associated Broker or Dealer	
State	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)	All States
	[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] {TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]	
Full	Name (Last name first, if individual)	
Bus	iness or Residence Address (Number and Street, City, State, Zip Code)	
Nan	ne of Associated Broker or Dealer	·
Stat	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers	All States
	(Check "All States" or check individual States)	All states

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	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	SE OF	PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box 1 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Commiged.		Aggregate	Amount Already
	Type of Security	О	Offering Price	Sold
	Debt Allocate between warrant and debentures	<u>\$</u>	.0	<u>\$</u> 0
	Equity	\$	0	\$0
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants) 1/	\$	2,000 000.00	\$ 2,000 000.00
	Partnership Interests	\$	0	<u>\$</u>
	Other (Specify Associated)	\$	0	<u>\$ 0</u>
	Total	<u>\$</u>	2,000 000.00	\$ 2,000 000.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
			Number	Aggregate Dollar Amount
			Investors	of Purchases
	Accredited Investors		3	\$ 2,000 000.00
	Non-accredited Investors		0	<u>\$0</u>
	Total (for filings under Rule 504 only)		<del></del>	\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		T f	Dollar Amount
	Type of offering		Type of Security	Sold
	Rule 505		<u></u>	\$
	Regulation A			\$
	Rule 504			\$
	Total			\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$
	Printing and Engraving Costs			<u>\$</u>
	Accounting Fees			\$
	Engineering Fees			<u>\$</u>
	Sales Commissions (specify finders' fees separately)	• • • • • • • • • • • • • • • • • • • •		\$
	Other Expenses (identify) Legal			<u>\$ 2,000.00</u>
	Total		🖾	<u>\$ 2,000.00</u>
	b. Enter the difference between the aggregate offering price given in response to Part C - Question expense furnished in response to Part C - Question 4.a. This difference is the "adjusted gross prissuer."	oceeds	to the	\$ 1,998,000.00

 $<sup>^{17}</sup>$  Investors receive notes convertible into equity securities and warrants the issuer will sell in its next round of equity financing. KC01DOCS875624.1 Page 5 of 9

	C. OFFERING PR	ICE, NUMBER OF INVESTORS, EXPENSES AND	USE OF PROCEEDS	
5.	for each of the purposes shown. If the ame and check the box to the left of the estimat	gross proceeds to the issuer used or proposed to be used ount for any purpose is not known, furnish an estimate e. The total of the payments listed must equal the orth in response to Part C - question 4.b above.	l	
			Payments to Officers, Directors, and Affiliates	Payments to Others
	Salaries and fees		□ <u>\$</u>	□ <u>\$</u>
	Purchase of real estate		□ <u>\$</u>	<u> </u>
	Purchase, rental or leasing and install	ation of machinery and equipment	□ <u>\$</u>	□ <u>\$</u>
	Construction or leasing of plant build	ling and facilities	<b></b>	☐ <b>\$</b>
	Acquisition of other businesses (inclu offering that may be used in exchang pursuant to a merger)	iding the value of securities involved in this e for the assets or securities of another issuer	<u> </u>	<u> </u>
	Repayment of indebtedness		<u> </u>	<u> </u>
	Working capital		<u> </u>	\$1,998,000.00
	Other (specify):			
			<u> </u>	<u> </u>
			<u> </u>	□ <b>\$</b>
	Column Totals		. 🗆 💲	<b>∑</b> \$1,998,000.00
	Total Payments Listed (column totals	s added)	. 🛛 🗓 <u>\$1.9</u>	<u>98,000.00</u>
		D. FEDERAL SIGNATURE		
sig	nature constitutes an undertaking by the issu	ned by the undersigned duly authorized person. If this reports furnish to the U.S. Securities and Exchange Commaccredited investor pursuant to paragraph (b)(2) of Rule	nission, upon written reques	5, the following t of its staff, the
lss	uer (Print or Type)	Signature	Date	
Ma	achineryLink, Inc.	1/1/2	October 2, 2007	
Na	me of Signer (Print or Type)	Title of Mange (Print or Type)		
Jay	Lang	Vice President-Commercial Finance		
				•

## **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE										
1.	Is any party described in 17 CFR 230.252(c), of such rule?	(d), (e) or (f) presently subject to any of the disqual	ification provisions Yes No								
	See Appendix, Column 5, for state response.										
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.										
3.	. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.										
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice if filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.										
	e issuer has read this notification and knows the horized person.	contents to be true and has duly caused this notice	to be signed on its behalf by the undersigned duly								
iss	uer (Print or Type)	Signature	Date								
Ma	MachineryLink, Inc. October 2, 2007										
Na	me of Signer (Print or Type)	Title of Signer (Fint or Type)									
Jay	ay Lang Vice Pesident-Commercial Finance										

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

### APPENDIX

1	2 3 4			5	5					
	to non-	d to sell accredited rs in State Item 1)	Type of security and aggregate offering price offered in state (Part C - Item 1)		Type of investor and amount purchased in State (Part C - Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E - Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ	ļ				·					
AR						<u> </u>		_		
CA										
СО										
СТ										
DE										
DC										
FL									<u></u>	
GA								_		
HI										
ID									<u> </u>	
IL										
IN										
lA										
KS		х	Convertible Notes; \$2,000,000	1	\$1,712,236.00	0	_		Х	
KY										
LA										
ME										
MD										
MA									ļ <u>.</u>	
MI									ļ	
MN										
MS										
МО		Х	Convertible Notes; \$2,000,000	1	\$87,764.00	0			Х	
MT									ļ	
NE									<u> </u>	
NV									1	
NH								_		
NJ										

. 1		2	3	4					5 Disqualification	
	to non-	d to sell accredited rs in State s - Item 1)	Type of security and aggregate offering price offered in state (Part C - Item 1)		Type of investor and amount purchased in State (Part C - Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
NM				**					<u></u>	
NY										
NC										
ND										
ОН										
ОК								<u> </u>		
OR									ļ	
PA		x	Convertible Notes; \$2,000,000	1	\$200,000.00	o			X	
RI										
SC									<u> </u>	
SD										
TN										
TX					ļ				1	
UΤ						1				
VT								ļ	ļ	
VA						_	<del></del>		-	
WA	<u> </u>								-	
WV										
WI								-		
WY										
PR	1			1					1	

